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AUTHOR Tomalesky, Michael; Jackson, Robert
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ABSTRACT

The goals and model of the Safety Harbor (Florida) Exceptional Student Center for severely emotionally disturbed children are based on three major assumptions: success in school has a high positive correlation with success in society; most severely disturbed students can be returned to mainstream school programs; and the majority of severely disturbed students are capable of learning appropriate self-control skills. Goals for the student as well as for the center are specified. The program model is built upon six consecutive phases: behavior management system (including a token system and a response cost system), affective intervention, academic curriculum, therapeutic intervention, therapeutic curriculum, and additional services. (CL)

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The Safety Harbor Exceptional Student Center: Multiphasic Academic/Therapeutic Program Model

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Michael Tomalesky and Robert Jackson

Pinellas County, Florida, defines a severely emotionally disturbed child as a student who requires a special center program. The severely emotionally disturbed student has demonstrated an inability to function within a mainstream Emotionally Handicapped Program. The severity of their dysfunction is sufficient to preclude them from mainstream activities and provides evidence that a full school week center placement is necessary to meet the student's needs.

The Safety Harbor Exceptional Student Center has been under development since its inception in June of 1980. A comprehensive academic/-therapeutic program has been developed, based on several assumptions about the severely emotionally disturbed population.

1. Success in school has a high positive correlation with success in society. School provides learning experiences for students in social awareness, as well as codes of conduct and skills necessary to provide income and security in later life. Severely emotionally disturbed students are not successful in regular school. The severely emotionally disturbed student who is provided the opportunity to learn appropriate school behaviors and who achieves success in school will be better prepared for dealing with the stresses associated with daily living. The Center program focuses on teaching students school survival skills.

2. Most severely emotionally disturbed students can be returned to mainstream school programs. The Center is not a terminal education facilty but one that provides students opportuities to learn the skills necessary to survive in school. Three-year comprehensive reviews of a student's progress determine the severity of the emotional problem. Students not ready for mainstreaming would fall into two categories: (a) students who require movement to a more intensive treatment program such as a residential or hospital program; or (b) students who will never be ready for mainstreaming but continue to benefit from the Center program. Students falling within the first category would be referred to residential or hospital programs. The students falling within the second category will be constantly reviewed on a yearly basis, as well as during their three-year comprehensive reviews. Staff at the Center acknowledge

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that certain students would best be served by the Center program and should not be denied the opportunity.

3. The majority of severely emotionally disturbed students are capable of learning appropriate self-control skills. Self-control is defined as an awareness of alternatives, choosing an appropriate alternative, and putting that alternative into practice. For the aggressive child, an appropriate alternative would be discussion instead of violence; and for the withdrawn or nonparticipatory student, a positive assertive statement would be an appropriate response.

The Safety Harbor Exceptional Student Center Multiphasic Academic/-Therapeutic Model had been developed based on these assumptions. The following report is a description of this program.

CENTER PROGRAM GOALS

Two sets of goals have been established as a means of orienting program development. Goals for the Student define the areas of improvement each severely emotionally disturbed student will concentrate on during their enrollment in the Center Program. Goals for the Center Program are necessary to achieve the student goals.

Goals for the Student

1. *Adapt to school environment.* Rapid orientation of the student to the program expectations and procedures is important. Learning the schedule, teachers' names, and accepting the daily routine form are the first steps made by the student in becoming part of the program.

2. *Develop self-control skills.* Lack of appropriate self-control skills is one of the primary dysfunctions associated with the severely emotionally disturbed population. The aggressive child will develop less aggressive behavior and the withdrawn cild will develop more assertive interaction styles.

3. *Develop emotional awareness.* Each student will be provided an opportunity to learn more about themselves through interaction with peers and adults. Developing emotional awareness means understanding feelings and how to control them.

4. *Develop appropriate emotional/social skills.* One of the major goals for each student is to learn more appropriate social skills. Survival in school is measured by the student's ability to respond with accepted behaviors to stress, failure, and daily demands of peer and adult interaction. The Center Program will offer students the freedom to explore answers to their personal social and emotional problems.

5. *Expand/develop academic skills.* In association with poor social development, many severely emotionally disturbed students are further handicapped by learning disabilities. Each student will work on grade level tasks to maximize the amount of information they can learn. Although behavioral control is the essence of the Program model, academic development is still a function of the public school system and is not lost from sight in the Program model.

6. *Demonstrate goals 1-5 and mainstream.* Each student will learn sufficient survival skills and make enough academic progress to return to the mainstream program. Those students not meeting this goal will be referred to other programs more suitable to their needs.

Goals for Center Program

1. *Maintain consistent, fair, therapeutic environment.* A therapeutic milieu will be developed that constantly directs students toward the development of self-control and emotional awareness.
2. *Provide trained change agents.* The teacher as a change agent provides each student the opportunity to learn about themselves, as well as to explore alternative behavior patterns. The majority of classroom problems will be dealt with by the teacher and student in an effort to encourage self-control. The teachers do not change student behavior, but enhance opportunities for students to change their own behavior.
3. *Provide therapeutic intervention.* In conjunction with the therapeutic milieu, intervention techniques such as group and individual counseling will be utiiized to uncover the psychodynamic processes of each student. In addition, group and individual counseling are means for students to explore their feelings.
4. *Provide therapeutic emotional growth experiences.* The environment of the Center will encourage student and adult interaction thereby helping students learn new and appropriate social skills. Group lessons on values and life styles will be a primary means of achieving this goal.
5. *Provide academic curriculum.* Since each student has his/her own specific learning style, as well as strengths and weaknesses, Individual Educational Plans are developed to provide students the maximum opportunities to benefit from the presentation of academic curriculum. Individualization is encouraged, although group learning is also considered important.
6. *Provide for family and community involvement.* The Center Program will involve the student's family and community resources in a concentrated effort to maximize the effects of the program on each student's emotional and academic growth.
7. *The follow-up of cases.* Assessment of the student's progress in the mainstream provides feedback for program modification. The Center Program t ies not to "abandon" students once they are discharged from the program.

MULTIPHASIC ACADEMIC/THERAPEUTIC PROGRAM MODEL

The Safety Harbor Program Model is divided into six consecutive phases. Phase I Behavior Management System forms the foundation upon which the other five phases are overlayed. Each phase is designed to join with the preceding phase to build a congruent whole. Individual phases are important alone, but together address the goals for both student and program.

Phase I: Behavior Management System

The goal in Phase I is to provide a schoolwide behavior management foundation. The behavior management system is based on four major subparts.

1. *The Token System.* The Token System is based upon receiving one point for every 15 minutes of time engaged in target behavior activity. Three target behaviors are selected by the student and staff and are written on the Individual Student Point Card. Each student maintains his/her card and is issued a new one on a daily basis. The student day is divided into seven 45-minute periods and one 20-minute lunch period.

Recording of points for demonstration of each target behavior results in a maximum of 72 points per day. There are bonus points for bus behavior and completion of homework assignments. Each point card is signed by the teacher and is returned the next day with the parent's signature. Target behaviors are selected from a schoolwide list of behaviors that represent successful school conduct. Target behaviors are also individually based on a student's particular emotional dysfunction.

2. *Response Cost System.* Certain behaviors are considered to be unacceptable in both the Center and the mainstreamed school. Behaviors including threatening or attacking other students or staff members, destroying school property or personal property, inappropriate language, and initiating conflicts are believed to be negative behaviors which are universally unacceptable. Students lose positive points when they are engaging in these and other negative behaviors. The Response Cost System allows the student to "buy back" negative points with the positive points already earned. Failure to maintain self-control is recorded through not receiving positive points for a target behavior and/or losing points for negative behavior. Buying back negative points provides the student a second chance to salvage the entire day. The second chance acknowledges that appropriate behavioral control is difficult but can be developed with the support of the program. The positive points are meaningful and can be traded for various items or activities. The school store "sells" items such as posters, paper, pencils, food snacks, and toys. In addition to tangible items, field trips and classroom projects may be purchased. Each student maintains a point "bank account" in which positive, negative, and point totals are recorded. Should a class plan a field trip requiring 300 points, the teacher will help each student save points in the bank account. The student is helped to learn to delay immediate gratification for future rewards through this process.

3. *Level System.* The student progress in mastering target behaviors leads to consideration for movement from the most restrictive to the least restrictive level. The Center utilizes a three-level system: Level Three is considered the most restrictive and beginning level for each new student. Level Three students are escorted by an adult whenever they are out of the classroom. Trips to the bathroom and lunchroom are total class activities. Students also have relatively few freedoms within the classroom. They are seated in individual study carrels and are allowed to interact in groups through teacher-controlled activities. Level Two students have made progress in greater self-control and enter the next less restrictive level. Level Two students may do errands for the teacher, go to the bathroom by themselves on request, receive extra minutes in the lunchroom or during free time activities. The Level Two student is assigned a desk in an open area of the classroom. Level Two students are positive peer role models since they are demonstrating success at mastering target behavior and self-control skills. Level One students have few specific target behaviors. They are restricted as little as possible while functioning within the confines of universally accepted school regulations. Level One students are in preparation for mainstreaming, and role-play as many regular school behaviors as possible.

All students entering the Center are considered Level Three and have target behaviors based on their individual needs. After a minimum of 6 weeks, Level Three students who have obtained 90% of the total points for each set of target behaviors during the 7th and 8th weeks are considered

eligible for movement to Level Two. The same criteria is in effect for Level Two students under consideration for movement to Level One. Level One students are eligible for trial mainstreaming in an Emotionally Handicapped Program after 8 weeks of success on Level One.

Students who have difficulty maintaining Level One or Level Two behaviors are lowered to the next level. Students return to the upper level through a contractural arrangement with the teacher. The time frame for return to the upper level is spelled out in the contract. The level system is designed to give students a tangible goal that remains flexible enough to compensate for student failure to maintain behavioral expectations.

4. *Program Alternative Room.* When a child's problem cannot be dealt with in the classroom, the Program Alternative Room is brought into use. The PA Room is an empty classroom to which the student and teacher may go to discuss classroom problems. The PA Room serves as an alternative to the classroom as a place for the student to act out and process emotions with an adult. Rapid return of the student to the classroom is the goal of the use of the PA Room. Teachers as change agents help the student to adjust to the stresses of school and classroom. The PA Room offers a quiet place for this process to occur and is not used as a punishment or timeout period.

A full-time behavior specialist monitors the behavior management system, as well as serving as a consultant to the teachers and aides. All support staff are also resources to the teacher who may need assistance during a session with a pupil experiencing difficulties.

Phase II: Affective Intervention

The goal of Phase II is to reduce the escalation of a student's problem or emotional condition into a crisis incident. The teacher is constantly supported in developing a positive rapport with each student. The teacher and student deal with problems through emotive counseling techniques and avoid the need for physical restraint. The teacher constantly develops affective intervention skills through ongoing in-service activities. In-service training such as Transactional Analysis and other types of communication and counseling skills are provided by the support staff. Outside consultants and/or representatives of various community programs are also invited to orient staff to affective intervention ideas.

Phase III: Academic Curriculum

The goal of Phase III is to provide each child material and instruction based on individual needs and skills. Information gained by psychological evaluation, teacher evaluation, and group testing provides information for the development of individual academic educational plans. The main concern of Phase Three is cognitive and academic skills development. In addition to academic tasks, middle and high school grade students rotate through a Home Economic sequence. Cooking, sewing, house care, hygiene, and care of clothes form part of the vocational experience. Agricultural facilities are also available to each teacher. Many classes engage in growing vegetables and/or small house plants.

Phase IV: Therapeutic Intervention

The goal of Phase IV is to provide group and individual counseling to each student. The support staff is primarily responsible for providing tradi-

tional group and individual counseling experiences for each student at the Center. Group counseling is an information gathering process, as well as an additional opportunity for small groups of students to interact in a therapeutic manner. The counseling, whether individual or group, is directed toward expanding the student's awareness of his/her emotional processes and development. No long-term psychotherapy is attempted. Counseling relies on the group process to provide each student an opportunity to grow emotionally and socially. Self-control is gained as each student learns to anticipate his/her reactions to situations in which they once appeared to be "out of control." Many students are also clients of the mental health system. Coordination of therapeutic activities through the mental health system is a Phase VI task.

Phase V: Therapeutic Curriculum

The goal of Phase V is to enhance the social and emotional skills of students through affective education. The full-time guidance counselor is primarily responsible for the therapeutic curriculum. The counselor is scheduled regularly in each classroom and conducts classes in values clarification, exploration of feelings, and leads discussions about more appropriate behavioral alternatives in given situations. Through the use of Center developed as well as packaged guidance materials the counselor draws upon classroom group process to explore social and emotional concerns. Group counseling and guidance lessons are a part of the daily schedule.

Phase VI: Additional Services

The goal of Phase VI is to enhance the overall effectiveness of the program by utilizing special resources to accomplish objectives. The multiphasic program concept is a process of building a program on interlocking phases, each addressing a specific function. The Behavior Management System forms the foundation upon which the multiphasic program is built. Phase VI is the capstone of the multiphasic program in which community services, psychiatric consultation, case follow-up, parent involvement, and general administrative services are pulled together to enhance the overall effectiveness of the program. Community involvement with mental health providers as well as community action groups broadens the scope of the Center Program and brings the "world" to the student. The school coordinates mental health services through ongoing contact with the mental health case-managers.

The School Advisory Committee provides parents a meaningful way to help their child by impacting upon the development of the Center Program. Outreach services to parents and families are also provided by the full-time School Social Worker. Home visits and regularly scheduled telephone updates keep parents informed of their child's progress.

SPECIAL CENTER ACTIVITIES

Many SED students are reluctant to take risks in new situations. They have been reinforced in the past for choosing the same type of negative alternatives to deal with stressful situations. The Center Program helps students learn and choose new alternative behaviors and achieve a higher level of self-control. One of the unique characteristics of the Center Program is that the staff is willing to take risks along with the student as a

means of helping students to grow in self-control and emotional awareness. At least one major field trip occurs during the course of the school year. Trips to wilderness camps have been opportunities for staff and students to interact in an environment very unlike that of the classroom. These types of excursions have proven to be very beneficial in establishing better student and staff rapport, as well as forcing students to seek new alternative behaviors while taking emotional risks.

Classes also make trips to local businesses, fairs, and community activities. Classes studying foreign countries, for example, may prepare food dishes associated with a given country. Buying and preparing the food is a study in group dynamics. The class then serves the food to invited guests. This process highlights proper manners and social etiquette.

Sports activities that comprise the full-time physical education program have been extended beyond the normal curriculum. Basketball games with other schools provide students the opportunity to learn self-control in competition as well as sportsmanship with unfamiliar players.

SUMMARY

The Safety Harbor Exceptional Student Center Program has gone through numerous revisions during its development. The Multiphasic Academic/Therapeutic Program Model goals are stated in general terms to allow specific details to be worked out as information is gathered during operation. Each staff member provides feedback used to improve the program. The Safety Harbor Exceptional Student Center Program is dedicated to helping the severely emotionally disturbed student learn self-control, emotional awareness, new academic material, and school survival skills. The program is constantly undergoing modification to better achieve these objectives.

Michael Tomalesky, Psychologist, Safety Harbor Exceptional Center, 675 Elm Street, Safety Harbor, Florida 33572
Robert Jackson, Principal, Safety Harbor Exceptional Center, 675 Elm Street, Safety Harbor, Florida 33572